

09/807214

ISSUE SLIP STAPLE AREA (for additional cross references)

5/7/01

Check off  
 Remarks

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>CS</i>	<i>45</i>	<i>4/23</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>2A</i>		<i>8-23-01</i>

## INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral)..... Canceled                      A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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